## OFFICIAL FILE ILLINOIS COMMERCE COMMISSION DRMAL COMPLAINT

For Commission Use Only:
Case: 08 0222

Illinois Commerce Commission 527 E. Capitol Avenue Springfield, Illinois 62701 ORIGINAL

Regarding a complaint by (Person making the complaint): $IEFFERY DEAN MCCORMICK$ Against (Utility name): $A+E+$
As to (Reason for complaint) WHEN Atat Bought out SBC MY  FILE OR PAPER WORK got JOST TW APAGE  FRATE. I'VE PAID EVERY BIZE I WAS SENT  AND HAVE FAIKED to 23 PEOPLE HIPF WORK  FOR Atal ABOUT HILLS ISSUE, TO NO AVAIL  in CHICAGO Illinois.
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:
My mailing address is 2246 E. WOODS + AP+ B DEC. IL 6252
The service address that I am complaining about is A+17 minwest 220 M. merin 100 And Roll
The service address that I am complaining about is $\frac{A+e1}{A+e1}$ $\frac{minwes+220 \text{ M}}{meRipinos}$ $\frac{meRipinos+Rm861}{minwes+220 \text{ M}}$ $\frac{meRipinos+Rm861}{meRipinos+100}$
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [217] 864-940 7
My e-mail address is   will accept documents by electronic means (e-mail)
(Full name of utility company)
In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your commint.
83111. Apm. Cope. Part 201  SFC+; on 10-101.1  Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?
Has your complaint filed with that office been closed?

extra sheet of paper if needed. $35/-31$ + $\mu$ EY $5$ AY $\pm$ 5 $0$ $\nu$	UED BY 3-10-08
extra sheet of paper if needed. 351.31 +HEY SAY IS OU AS BEFORE WHEN +HESE COMPANY	S MERCHN AND
18St MY ACCOUNT, I fEEL it'S MOTO THAT. I'VE PAID EVERY BILL THA TO ME AND HAVE SPENT A 1 OF OC.	ny fault for
THAT. I'VE PAID EVERY BIZE HA	1 WAS SENT
to ME AND HAVE SPENTA 101 OC,	my time tring
to correct HHIS, I'VE tAIKED to	23 PEUPLE
-ABOUT THIS AND HALL THE PATE	E5 +111065
AND HAMES AND NO ONE COU	NO HEIP ME.
Please clearly state what you want the Commission to do in this case: It's NOT MY WANT TO GO RETRO ACTIVE ON 4 HIS CACT I FEEL ITS HHEPZE FOULT FOR HOP	fAULT THAT THEY
COLL TO GO RETRO ACTIVE ON & HIS	BIZC DUE to THE
<b>NOTICE:</b> If personal information (such as a social security number or a bank account number) is contained in proceeding, you should submit both a public copy <b>and</b> a confidential copy of the document. Any personal inform	
obscured or removed from the document prior to its submission to the Chief Clerk's office. Any personal in	formation contained in the confidential copy
should remain legible. If personal information is provided in your public copy, be advised that it will be available.	
e-Docket website. The confidential copy of any filing you make, however, will only be available to Commissi confidential version of a document, clearly mark them as such.	on employees. If you the both a poone and
Today's Date: 3-11-08 Complainant's Signature: Lefter (Month, day, year)	yD Milomech
(Month, day, year)	
If an attorney will represent you, please give the attorney's name, address, telephone number, and e-mail addre	ess.
When you finish filling out this complaint form, you need to file the original with the Commission's Chief Clerk. W	
include one copy of the original complaint for each utility company complained about (referred to as responder	ita).
VERIFICATION	
A notary public must witness the completion of this part of the form.	
I, <u>TEFFERY D. MCCORMICK</u> , Complainant, first being duly sworn, say th whapit says. The contents of this petition are true to the best of my knowledge.	at I have read the above petition and know
what it says. The contents of this petition are true to the best of my knowledge.	
Letters DM Gomeck	<del></del>
Cemplainant's Signature	
Subscribed and sworn/affirmed to before me on (month, day, year) Marcu 15 7008	
	``````````````````````````````````````
Signature, Notary Public, Illinois	AUAPISAL SEALS SANET ANDREWS
aignature, notary rubite, minus	NOTARY PUBLIC, STATE OF ILLINOIS \$  MY COMMISSION EXPIRES 03/29/08 \$
NOTE: Failure to answer all of the questions on this form may result in this form being returned without proc	eszing ***********************

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an